



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8810

<b>SERIAL NUMBER</b> 09/929,235	<b>FILING OR 371(c) DATE</b> 08/13/2001 <b>RULE</b>	<b>CLASS</b> 083	<b>GROUP ART UNIT</b> 3724	<b>ATTORNEY DOCKET NO.</b> SDT 314
------------------------------------	---	---------------------	-------------------------------	---

**APPLICANTS**

Stephen F. Gass, Wilsonville, OR;  
David A. Fanning, Vancouver, WA;  
Joel F. Jensen, Redwood City, CA;  
Sung H. Kim, Palo Alto, CA;  
Andrew L. Johnston, Redwood City, CA;  
David S. D'Ascenzo, Portland, OR;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/225,056 08/14/2000 and claims benefit of 60/225,057 08/14/2000  
and claims benefit of 60/225,058 08/14/2000  
and claims benefit of 60/225,059 08/14/2000  
and claims benefit of 60/225,089 08/14/2000  
and claims benefit of 60/225,094 08/14/2000  
and claims benefit of 60/225,169 08/14/2000  
and claims benefit of 60/225,170 08/14/2000  
and claims benefit of 60/225,200 08/14/2000  
and claims benefit of 60/225,201 08/14/2000  
and claims benefit of 60/225,206 08/14/2000  
and claims benefit of 60/225,210 08/14/2000  
and claims benefit of 60/225,211 08/14/2000  
and claims benefit of 60/225,212 08/14/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
\*\* 09/19/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY OR</b>	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

27630

**TITLE**

TABLE SAW WITH IMPROVED SAFETY SYSTEM

<b>FILING FEE RECEIVED</b>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )